

it was drawn off through stop-cocks into the cups. Neither sugar nor milk was sent to the wards for use with the tea or coffee, so each patient had to take the beverage as he found it, or go without. No butter was given with the bread. The morning meal, therefore, consisted of coffee with dry bread, and the evening meal of tea and dry bread. The boiled beef and potatoes for dinner were the same every day of the week, and we used to think the soup was the best part of the dinner for the patients, for it was quite thick, and contained vegetables; but among the resident physicians of the day, it was always believed that the boiled beef was the same meat that had already served to make the soup. My father, who was one of the attending physicians to the Hospital, struggled until he finally had butter added as a regular portion of the house diet at the evening and morning meals, and I well remember the pleasure he manifested when he had finally succeeded in effecting the reform. This must have been a good many years ago, for he resigned his position in the Hospital in 1881. After that time the diet was gradually improved, and now, as you all know, the Hospital food is excellent. I sometimes wonder whether, if changes go on, it will some day become too good for the class of people who consume it; but perhaps nothing can be too good for sick people, and certainly not if it is a means to effect their cure. It was formerly the custom that every patient admitted to the Hospital was given house-diet until other food was ordered by the physician. This was a great source of difficulty and of risk to the patients. I used often to find a patient suffering with typhoid fever, who had had a dinner set before him of boiled beef and potatoes, and if I complained to the nurse, he answered that nothing else had been ordered, and I was silenced. A great and important advance was made when the present rule went into force, that no patient after admission gets any food but milk, until it has been specifically ordered by the Doctor. This sometimes causes a little hardship, but the troubles it prevents are innumerable, and I believe it occasionally saves life.

When I came here as Resident Physician, in 1872, there was a men's receiving ward, but none for the women. The sick patients were taken directly to the medical ward, and women who were brought to the Hospital injured were taken immediately to the surgical ward and put to bed in the wards with the other patients. When accident cases were brought in, their introduction into the ward before they had received any first dressing or had been washed, caused considerable confusion. This continued to be the custom of the women's wards during the whole of the period of my residence in the Hospital. What I shall

tell you now you will hardly be able to believe! Until within a short time before my coming to the Hospital to live, there was no receiving ward at all nor any regular place for the performance of operations. Patients coming to the Hospital were taken directly to the wards without any washing and in their dirty and bloody clothes, often shrieking and crying, and followed by noisy friends and relatives, as many as had been able to get past the gate-keeper.

The operations were done in the ward corridors, or in the wards themselves. It was a common practice to clear the patients out of one of the smaller wards to operate in, but I have often seen amputations done in a ward with patients lying in the other beds. I was present at the first ovariectomy that was ever done in the Hospital. The operation was performed in one of the alcoves that then existed in the long ward in the west wing, and the other patients were in their beds and walking about the ward while the operation was going on.

When and how came all the wonderful improvements that have taken place since the days that I have described? It is not possible to give a direct and short answer to this question. Many and varied forces were at work to bring in this reform. Everybody occupied in the work or interested in the welfare of the Hospital did a part; the managers, the physicians, the executive officers, the nurses and even the patients, worked and talked in the direction of reform, which has been in the air for a hundred years or more in regard to Hospital administration, and this Hospital has never been behindhand in the race for improvement; as witness, for instance, what was here effected for the better care of the insane, by Dr. Rush. The first recollection I have of it is that at a joint meeting of the managers and medical staff, which was held for some purpose that I cannot now remember, the late President of the Board of Managers, Mr. Wister Morris, said that he would like to have women nurses in charge of every ward in the Hospital—men's as well as women's—and that he hoped to see the day when the change would be effected. I well remember my disgust and the feeling of fear that I should live to see such a state of things, for I was born a conservative, and the proposition, at the time it was made, sounded to me revolutionary. Now I must confess that I was wrong, for although there are many things in which our system may still be improved, the new ways are immeasurably superior to the old. The purposes of a Hospital are the relief of suffering and the cure of injury and disease—these noble ends are now much better subserved than they were twenty-five years ago. I believe that of all great charities a hospital is the greatest. To take in a poor

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